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AVENTIS US PAT DEPT(S) TRANSMITTAL

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ROSS J. OEHLER
AVENTIS PHARMACEUTICALS INC.
ROUTE 202-206
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PAUL IRVINE	(Depositor's name)
	(Signature)
APRIL 20, 2005	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/065,994	12/09/2002	Klaus-Ulrich Weithmann	DEAV2001/0073	6670

TITLE OF INVENTION: PYRIDINE-2,4-DICARBOXYLIC ACID DIAMIDES AND PYRIMIDINE-4,6-DICARBOXYLIC ACID DIAMIDES AND THE USE THEREOF FOR SELECTIVELY INHIBITING COLLAGENASES

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
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nonprovisional

NO

\$1400

\$300

\$1700

06/24/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
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HABTE, KAHSAY

1624

514-256000

04/21/2005 AWONDAF2 00000022 181982 10065994

01 FC:1501 1400.00 DA

02 FC:1504 300.00 DA

03 FC:8001 15.00 DA

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

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2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. JOSEPH D. ROSSI

2.

3.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

AVENTIS PHARMA DEUTSCHLAND GMBH

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

FRANKFURT AM MAIN, GERMANY

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

☒ Issue Fee☒ Publication Fee (No small entity discount permitted)☒ Advance Order - # of Copies 5 x 3 = \$15.00

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☐ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 18-1982 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

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Authorized Signature

Joseph D. Rossi

Date

April 20, 2005

Typed or printed name

JOSEPH D. ROSSI

Registration No.

47,038

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TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small>	Application Number	10/065,994
	Filing Date	December 09, 2002
	First Named Inventor	Klaus-Ulrich WEITHMANN et al.
	Art Unit	1624
	Examiner Name	HABTE, Kahsay
	Attorney Docket Number	DEAV2001/0073 US NP
Total Number of Pages In This Submission		

ENCLOSURES (Check all that apply)		
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<input type="checkbox"/> Reply to Missing Parts/Incomplete Application	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	Remarks	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	AVENTIS PHARMACEUTICALS INC.	
Signature	<i>Joseph D. Rossi</i>	
Printed name	Joseph D. Rossi	
Date	April 20, 2005	Reg. No. 47,038

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Signature	<i>Paul Irvine</i>	
Typed or printed name	Paul Irvine	Date April 20, 2005

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